

# The Algerian Experience in Managing Health Crises. “A Case Study of the COVID-19 Crisis”

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## Abstract

Through this research paper, we aim to present Algeria's experience in confronting the COVID-19 crisis, based on the perspectives of randomly selected doctors from various institutions nationwide. After conducting appropriate methodological procedures, it was concluded that Algeria's experience in facing this health crisis was largely successful, despite some shortcomings in the healthcare sector, whether material or human, as agreed upon by most researchers. Additionally, we have come to the realization that Algeria lacks the capacity to confront such crises amidst the human shortage afflicting the sector.

Keywords: Health Crises, Crisis Management, COVID-19, Coronavirus, Algeria.

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#### Introduction:

Like many other countries and societies, Algeria was impacted by the COVID-19 pandemic, which affected every part of the world. The country found itself facing a challenge that was difficult to overcome. Consequently, a set of preventive measures were taken to confront this crisis, such as temporary or partial closure of institutions with large human gatherings, like schools and universities, suspension of flights to and from the country, partial curfews, and the enforcement of mask-wearing and social distancing. However, these measures were not sufficient to prevent infections, especially considering some of the deficiencies in infrastructure, medical equipment, and most importantly, the lack of public awareness, which made it more difficult to overcome the crisis with minimal damage. This motivated us to conduct this study to better understand Algeria's experience in managing the COVID-19 crisis, with a focus on understanding the situation itself and assessing its preparedness to face future crises if needed.

The study will address the following question: How can Algeria's experience in confronting the COVID-19 crisis be evaluated? And can we say that Algeria successfully confronted the crisis with minimal damage?

#### 1- Study Objectives:

- To identify the available resources within the state to confront health crises (material and human).
- To understand the readiness of the healthcare sector in Algeria to confront such crises.
- To evaluate Algeria's experience in addressing the COVID-19 crisis.
- To discuss some of the consequences of the crisis and understand the challenges faced by the state due to the recent COVID-19 crisis.

#### 2- Study Concepts:

2.1. Crisis: A crisis can be defined as a tension that affects the public system and leads to a radical change or transformation in current situations, whether economically, politically, or health-wise, requiring management and efforts to overcome it.

2.2. Health Crisis: A health crisis is defined as disruption, panic, and fear caused by the spread of dangerous epidemics and diseases, especially in the absence or weakness of state intervention. A health crisis can move from a regional to an international scope, as was the case with the recent COVID-19 crisis. (Boualha, 2021, p. 272) Thus, it can be described as a disruption in the health system due to epidemics, contagious diseases, or natural disasters, which requires rapid and intensive health intervention by the competent authorities.

2.3. Crisis Management: Crisis management refers to the methods used to control a crisis by utilizing a range of tools and efforts to overcome it, contain its causes, and learn from its aspects to

avoid future occurrences. (Maher, 2006, p. 20) Therefore, it can be described as an attempt to handle the situation in a way that helps to avoid or minimize its impact. This process includes several stages: (El Aissawi, p. 51-52)

- Crisis Avoidance Stage: In this stage, efforts are made to prevent the crisis from occurring through forecasting and direct prevention, along with gathering information about its causes.
- Crisis Preparedness Stage: This involves preparing to manage the crisis by establishing management centers and training teams.
- Crisis Recognition Stage: This stage acknowledges the existence of the crisis as a real fact and involves necessary actions (meetings, clarifying facts, mobilizing resources).
- Crisis Containment Stage: Quick decisions are made to contain the crisis and diminish its effects, forming a team to face it swiftly.
- Crisis Resolution Stage: This stage demands quick action because the risks do not wait, and the organization works efficiently to direct and resolve the crisis using available methods.
- Crisis Learning Stage: This is the phase of learning and evaluating the experience, where the crisis is reviewed, its management reassessed, lessons are drawn, and preparations are made to prevent future crises.

2.4. COVID-19 Virus: An infectious disease that first spread in Wuhan, China, in early December 2019, and on January 30, 2020, the World Health Organization declared a public health emergency. (Drbal, 2022, p. 256)

### 3- Methodological Procedures of the Study:

Every study has its specific methodological procedures, especially regarding the adopted approach, data collection methods, analysis, and conclusion drawing.

3.1. Adopted Approach: This study falls under descriptive and analytical studies, primarily aiming to collect as much data as possible to present and analyze it accurately, ultimately drawing conclusions that provide clarification. This approach is defined as: "Studying a reality or phenomenon as it exists, aiming to describe it accurately and expressing it either quantitatively or qualitatively." (Houma, 2005, p. 55)

3.2. Data Collection Tools and Techniques: The study relied on a survey form to gather field data, which included a set of questions related to Algeria's readiness to confront health crises similar to the COVID-19 pandemic. The survey also focused on Algeria's experience in managing the recent COVID-19 health crisis. The survey was distributed to 254 general practitioners and

specialists who were selected based on their direct experience with the crisis and their testimonies about the different phases of its management.

A comprehensive definition of the survey is: "One of the most widely used data collection tools, consisting of a set of questions about a particular subject, covering all its aspects, allowing the collection of necessary data for research through the answers provided." (Nabar, 2022, p. 49)

As for the data analysis, the percentage method and some graphical illustrations were relied upon to understand the respondents' trends regarding the available options, in order to identify the appropriate and most reliable options for drawing the final results.

#### 4- Results Obtained:

The results presented are related to the answers of 254 respondents, who were randomly selected through social media, and their characteristics are as follows:

##### Gender

	Male	Female	Total
Other Characteristics	Number	%	Number
Age	Less than 25 years	44	24.3%
25-40 years	119	65.74%	57
40-55 years	18	9.94%	01
Total	181	100%	73

##### Professional Experience

	Less than 10 years	166	91.71%	63	86.3%	229	90.15%
10-20 years	11	6.07%	08	10.95%	19	7.48%	
More than 20 years	04	2.20%	02	2.73%	06	2.36%	
Total	181	100%	73	100%	254	100%	

##### Specialty

	General Medicine	155	85.63%	61	83.56%	216	85.03%
Internal Medicine	02	1.10%	03	4.10%	05	1.96%	
Pulmonary and Respiratory Diseases	24	13.25%	09	12.32%	33	12.99%	

	General Medicine	155	85.63%	61	83.56%	216	85.03%
Total	181	100%	73	100%	254	100%	

Observing the table above, which describes the sample of the study, we note that the majority of the respondents are under the age of 40, accounting for more than 90%, while only 7.48% are over the age of 40. Regarding professional experience in the medical field, 90% of the sample has less than 10 years of experience, which is logical given the age variable and its results.

As for the specialty of the sample members, we found that 85.03% of them are general practitioners, compared to 12.99% specializing in pulmonary and respiratory diseases. This is naturally due to the widespread nature of the epidemic, where everyone became mobilized to address the recorded cases regardless of their specialty.

#### 4.1. The Health Situation in Algeria during the Corona Crisis

No one can deny the poor health situation in Algeria during the COVID-19 crisis, which was also the case for most countries, including developed ones. However, it cannot be said that this pandemic only revealed many negatives; it also left behind many positive aspects that cannot be ignored or overlooked.

Despite the severity of the phase, the results highlighted some deficiencies that the health sector in our country suffers from, such as a lack of medical facilities and insufficient human resources to handle such crises. From our field study, it became evident that most of the respondents agree on certain points, such as Algeria's overall success in facing the crisis. This is based on the figures obtained from the field study, where more than 90% answered "Yes."

The following diagram illustrates the variation in responses:



These responses were not random guesses but were based on concrete decisions made by the country's authorities. Since the outbreak of the epidemic, the authorities have attempted to

contain it by tightening measures, including quarantining infected individuals and suspending flights to and from the country. As the epidemic began to spread widely and rapidly, domestic flights were also suspended, and mosques were closed with the suspension of collective prayers, along with sports, cultural, and recreational activities. Additionally, most workers were furloughed, and public transportation was stopped.

During this period, a follow-up and monitoring cell for the epidemic was set up, which provided advice and guidance. As a result, infected cities were placed under full quarantine (Blida) or partial quarantine (Algiers), along with other decisions such as closing cafes, restaurants, and retail stores (except grocery stores).

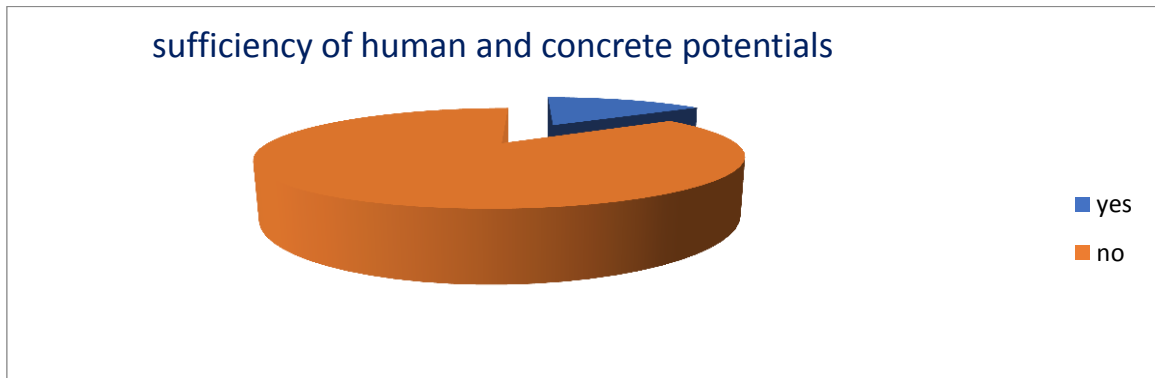
By the end of the first quarter of 2020, Algeria recorded a significant increase in cases, prompting the tightening of preventive measures, including expanding the quarantine to some provinces such as Oran, Tipaza, Medea, Setif, Tizi Ouzou, Batna, and El Oued. Many regional branches of the Pasteur Institute were also opened to detect recorded cases, especially in the far west (Oran) and the southeast of the country (Ouargla). By mid-April of the same year, a nationwide quarantine was imposed on 38 provinces from 7 p.m. to 7 a.m., and the most affected provinces were subjected to quarantine from 3 p.m. to 7 a.m., such as Medea, Tipaza, Algiers, Tlemcen, Ain Defla, Setif, and Tizi Ouzou.

In light of the increasing number of cases, the monitoring cell decided to further tighten measures, including the mandatory wearing of masks in public places, stricter quarantine measures, and a change in the working system for many sectors, except for some vital sectors such as commerce, industry, health, and security. By the end of the school year, the Ministry of Education decided to rely on the average of the first and second semesters to allow promotion to the next year.

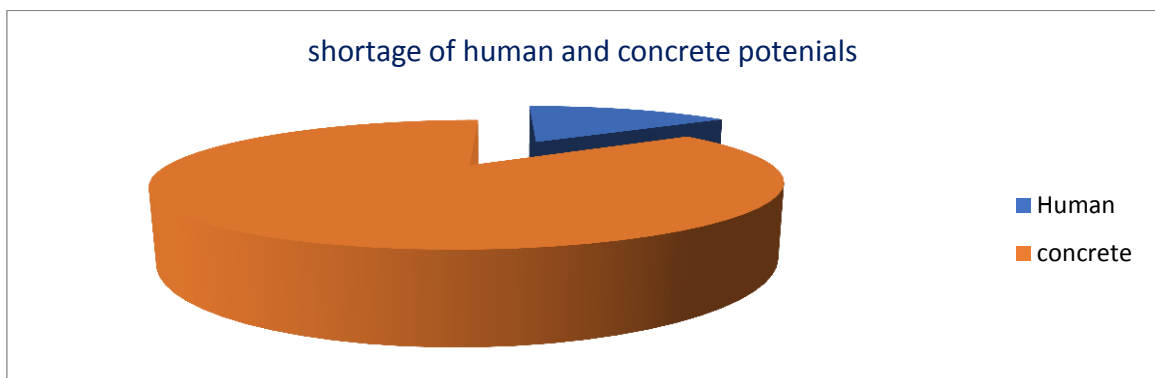
However, at the beginning of the second semester of the same year, the authorities decided to outline a roadmap for the gradual lifting of strict measures and quarantine in certain provinces, considering the health situation of each province.

#### 4.2. Material and Human Resources and Their Capacity to Confront the Crisis

Algeria, like other countries, mobilized all available resources to tackle the COVID-19 crisis, both materially and humanly. However, these resources were not sufficient to confront the large-scale damage caused by the crisis, as evidenced by the responses of the participants, who agreed that the available resources were inadequate to properly care for the infected and to handle any emergency that might arise from the health situation due to COVID-19. The responses were as follows:



From these responses, it is clearly evident the significant shortage faced by the healthcare sector, both in terms of human resources (doctors, nurses, etc.) and material resources (facilities, beds, medical equipment, medical devices, etc.). From what was recorded, it became clear that the most impactful shortage in managing the crisis was related to material resources, as illustrated in the diagram below.



It is noted here that the material deficiencies exceed the human deficiencies by more than four times, which confirms the value of human resources in the health sector and the effort exerted by them to achieve quality healthcare services that exceed the available human capabilities. On the other hand, the material equipment crisis can only be solved by providing it because some cases require the use of medical devices such as ventilators, for example, or radiology equipment... all of which cannot be replaced by human resources.

#### 4.3. The Aftermath of the Corona Crisis on Individuals and Society

Every health crisis inevitably has a set of consequences, whether on the individual or collective level. The COVID-19 crisis left numerous psychological, social, economic, and even health impacts, which we can summarize briefly as follows:

- **Psychological Effects:** The recent health crisis related to the COVID-19 pandemic left deep psychological effects that affected not only individuals infected with the virus but also other members of society. These effects ranged from various psychological disorders that affected people of all ages and categories. For those who contracted the virus, many negative psychological symptoms arose, which were directly linked to the social isolation imposed by the pandemic, as they began avoiding social interaction and tending to isolate themselves from others. This avoidance had a significant impact on their mental state, with many reaching a state of complete loneliness, leading to the development of depression in many of them.

In addition to this, the psychological effects were not limited to isolation alone but also included the emergence of anxiety and severe stress symptoms, which were among the most prominent psychological challenges faced by individuals during this crisis. The infected person became more anxious about the symptoms that might appear due to the virus, reinforcing their fear of getting infected again or of the health impacts of the disease on their body. Moreover, since these individuals lived the experience firsthand, they became more aware of the physical and psychological consequences of the virus, which contributed to a noticeable increase in their anxiety and stress.

- **Social Effects:** The impact of the health crisis caused by the COVID-19 pandemic was comprehensive, affecting all social categories, not limited to specific aspects of life but encompassing all levels. However, the severity and depth of these impacts varied significantly from place to place, depending on local requirements and available resources in each region. Many economic and social gaps that were hidden or overlooked in normal times emerged, allowing for an increase in the gap between different social classes. This crisis exacerbated social tension levels significantly, resulting in a range of acute problems such as higher divorce rates, increased cases of domestic violence, and the worsening of addiction in various forms.

At the same time, the repercussions of the crisis were not only negative; there were also some positive effects that could be built upon in the future. One of the most prominent of these effects was an increase in health awareness among individuals and communities, as personal and public health became essential in people's lives. The crisis also accelerated the adoption and use of modern technology in all areas, whether in remote work, e-learning, or social communication. On another level, the lockdown measures and restrictions imposed by countries helped reinforce social bonds within families, as these measures forced individuals to spend more time with their families. This, in turn, led to the rebuilding of family relationships in some cases, while it also contributed to



the breaking of bonds in other cases, as there were tense interactions or suppressed conflicts that surfaced due to the close proximity and surrounding circumstances.

- **Economic Effects:** The economic sector was one of the most affected areas by the recent pandemic, with the collapse of economies and institutions and the emergence of new ones. It also had a significant impact on unemployment rates due to the disappearance of some jobs or the dismissal of some employees. The gross national product of some countries experienced a significant collapse due to the lockdown imposed by the pandemic, which directly affected trade transactions, particularly in countries that heavily relied on food imports. Some studies found that:

- The COVID-19 pandemic caused significant losses in the global oil market, and Algerian oil saw a sharp decline at the beginning of the pandemic's spread.

- The crisis resulted in a liquidity crisis at banks and post offices, leading to a crisis of trust among the public, who rushed to withdraw their funds.

- The inflation rate in Algeria by the end of 2020 was recorded at an increase of 3.5%, compared to 2% in 2019, due to rapid changes in the consumer price index, which fluctuated over the months of 2020.

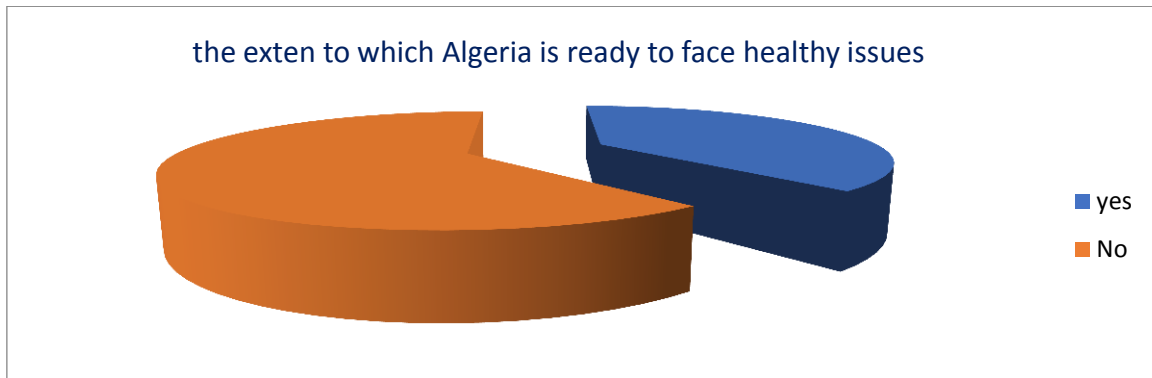
- The COVID-19 crisis deepened the wounds of the unemployed and the poor in Algeria, with the unemployment rate rising to 14.1%, which negatively impacted the living standards of individuals and their purchasing power, which declined significantly, pushing many of them into poverty.

- **Health Effects:** The COVID-19 crisis left significant health effects, both physical and psychological. Physically, the virus caused the death of many people, while others suffered from severe symptoms or long-term complications such as "long COVID," which includes chronic fatigue, difficulty breathing, and joint pain. The virus also affected several systems in the body, such as the respiratory system, heart, blood vessels, and nervous system, leading to health problems such as myocarditis, respiratory disorders, and kidney and digestive issues. Psychologically, the quarantine and social isolation led to an increase in anxiety and depression rates, as many individuals were psychologically affected by the fear of infection and the psychological pressure caused by the sudden changes in daily life.

#### 4.4. Algeria's Preparedness for Health Crises

Despite the aftermath of the recent health crisis, it remains a real test for countries to assess their capabilities in facing crises. In Algeria, through its management of the COVID-19 crisis, individuals surveyed all agreed on the country's lack of preparedness to face the same battle again, especially in light of the available resources (both material and human shortages). The data

presented in the following diagram shows the variation in the responses of the sample individuals regarding the preparedness to face such crises.



It is observed from the chart above that most of the respondents, despite the diversity of their workplaces, medical specialties, and geographical regions, agreed on an important point: the insufficiency of available resources, both material and human, to face future health crises. This resource shortage is considered one of the main challenges facing the healthcare system in dealing with major crises, such as the COVID-19 pandemic, reflecting the urgent need to improve and develop health infrastructure and provide specialized personnel and necessary equipment to ensure effective response in emergencies.

#### Conclusion

In conclusion, we can say that Algeria, like all other countries, can either succeed or fail in managing and overcoming crises of all kinds, depending primarily on its preparations and readiness to face these crises, both in terms of material and human resources. Despite the challenges it may face, investing in improving infrastructure, providing necessary resources, and training human personnel are essential factors that determine its ability to succeed in crisis management.

It can also be said that the success of crisis management is linked to a set of criteria that must be carefully considered, such as coordination between different entities, the presence of a comprehensive emergency plan, the ability to adapt to new developments, and the effectiveness of the health and administrative systems in dealing with crises. These criteria form the foundation upon which a proper response to future crises can be built, ensuring positive outcomes in facing them.

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